EXHIBIT J

		2
1		3
IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF VERMONT	1	Original Notice of Deposition of Leslie
Case No. 5:17-cv-194		DeMars and Amended Notice of Deposition
MISTY BLANCHETTE PORTER, M.D.,		of Leslie DeMars 6
Plaintiff	2	Subpoena to Testify at a Deposition
vs. DARTMOUTH-HITCHCOCK MEDICAL CENTER,		in a Civil Case 7
DARTMOUTH-HITCHCOCK CLINIC,	3	Letter, Birkmeyer and Compton to
MARY HITCHCOCK MEMORIAL HOSPITAL, and DARTMOUTH-HITCHCOCK HEALTH,		Leslie DeMars, DH13075-13082 9
,	4	Notice of Subpoena to Leslie DeMars,
Defendants.		4/3/18 15
	5	Notice of Subpoena to Leslie DeMars,
CONFIDENTIAL		6/11/19 15
	6	Excerpt of Deposition of Joanne
DEPOSITION OF LESLIE DEMARS taken on behalf of the Plaintiff at Norwich.		Conroy, 9/18/19 24
Vermont, on October 23, 2019, at 9:00 a.m.,	7	Email string, DeMars and David Seifer,
before Cynthia Foster, Registered Professional Reporter.		9/8/17 DH0011349 25
	8	Text messages between Leslie DeMars and
		Misty Porter, DEMARS0000001-87 41
	9	Email string, DeMars and Porter and
		McBean, DH0021243-44 59
	10	Email string, Porter and DeMars re
2		4
APPEARANCES:	11	Email, McBean to DeMars, 7/28/2016,
Geoffrey Judd Vitt, Esquire Sarah Nunan, Esquire		DH0025543-44 71
Julia Korkus, Paralegal Vitt & Associates, PLC	12	Email, Seguin to DeMars, 7/28/2016,
8 Beaver Meadow Road P.O. Box 1229		DH0011269-70 96
Norwich, Vermont, 05055, on behalf of the	13	Email, DeMars to Padin, DH0021261-62 106
Plaintiff, Misty Blanchette Porter, M.D., also present.	14	Excerpt from deposition of Ed Merrens 109
Katherine Burghardt Kramer, Esquire KBK Law	15	Email, DeMars to Padin, 5/12/2016,
6 Mill Street P.O. Box 23		re DS and credentialing, DH0021253 110
Middlebury, Vermont, 05753, on behalf of the Plaintiff, Misty Blanchette Porter, M.D., also	16	Chat with Richard Reindollar,
present.		DeMars0000101-102 111
Donald W. Schroeder, Esquire Foley & Lardner, LLP	17	Email, Porter to DeMars re confidential
111 Huntington Avenue, Suite 2500 Boston, Massachusetts, 02199-7610, on behalf of		review, 2/20/2017, DH0025077-79 115
the Defendants, Dartmouth-Hitchcock Medical Center, Dartmouth-Hitchcock Clinic, Mary	18	Email, Todd to DeMars re confidential
Hitchcock Memorial Hospital, and Dartmouth-Hitchcock Health.		review, 2/21/2017, DH0025437-42 115
Datunoum-Incheoek neath.	19	Email, Gunnell to DeMars re confidential
		review, 2/24/2017, DH0025441-42 115
	20	Email string, Gunnell to Herrick, DeMars,
		•
		re: REI/IVF Action Plan, 4/19/2017, DH0009582-83 with attachments 159
	21	
	21	Email, DeMars to Strohbehn, et al,

1 (Pages 1 to 4)

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1		you included the Value Institute?	1	f	iguring out a way if there's a way to make the
2		MR. SCHROEDER: She didn't say Ed Merrens.	2		REI Division members work cohesively?
3	A	I didn't say Ed Merrens.	3	A	So the first one was primarily team building.
4	. Q	Was he not involved in it?	4	Q	Yes.
5	A	No. He was not.	5	A	The second one was, again, a much longer
6	Q	Who made the decision ultimately?	6	,	workshop that went into much more depth and more
7		MR. SCHROEDER: For what?	7	ŗ	preparation of the Value Institute on behalf of
8	Q	To close the REI Division?	8	t	he Value Institute to look at what was going on
9	A	Again, we were not talking about that.	9	а	head of that workshop, to evaluate, again, the
10	Q	Well, somebody made a decision to close the REI	10	7	ways of working, the interpersonal
11		Division and to terminate the employees in that	11	r	elationships, and then to devise, to work on
12		division; is that correct?	12	t	he problems that they identify and to come up
13	A	Yes.	13	,	with that division or the team with which
14	Q	Who made that decision?	14	t	hey're working to have a process to move
15	A	Dr. Merrens.	15		orward.
16	Q	Okay. Now, prior to getting to that point,	16	Q	Were the results of the work done by the Value
17		getting to the point of deciding to close the	17	I	nstitute conveyed to Daniel Herrick and other
18		REI Division, who were the individuals who were	18		enior leadership at Dartmouth-Hitchcock?
19		involved in the discussions about the	19	A	Their recommendations and conclusions were
20		possibility of contracting the services to be	20	C	conveyed verbally to Daniel Herrick, Heather
21		offered by the division?	21		Gunnell, and me at a meeting about a week after
22	A	That was me, Heather Gunnell, the Value	22		he workshop.
23		Institute, Daniel Herrick.	23		Who conveyed it?
24	Q	Can you explain, please, what role or function	24	A	Whether it was Katie Wira or Sam whose last name
25		was performed by the Value Institute in these	25	I	'm blanking on at the Value Institute, both of
		130			132
1		discussions?	1		them were there.
2			_		
_	A	Sure. The Value Institute, we engaged them	2	Q	One of the two of them were both conveyed the
3	A	twice, specifically to work with the REI	3		One of the two of them were both conveyed the conclusions of the Value Institute?
4	A	twice, specifically to work with the REI Division on ways of working on team building, on	3 4	A	One of the two of them were both conveyed the conclusions of the Value Institute? Correct.
4 5	A	twice, specifically to work with the REI Division on ways of working on team building, on really effective teamwork and effective	3 4 5		One of the two of them were both conveyed the conclusions of the Value Institute? Correct. Let me take a short break.
4 5 6	A	twice, specifically to work with the REI Division on ways of working on team building, on really effective teamwork and effective communication. We had a one-day workshop in the	3 4 5 6	A Q	One of the two of them were both conveyed the conclusions of the Value Institute? Correct. Let me take a short break. (Recess taken 3:18 - 3:30 p.m.)
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1	Q	With the senior leadership at	1		before we go forward, I know for a fact that we
2		Dartmouth-Hitchcock.	2		have on our privilege log a document that is
3	A	I wouldn't characterize those meetings as	3		marked privileged relating to a meeting that
4		discussions.	4		John Kacavas attended. I can check it. I'm
5	Q	How would you characterize them?	5		almost positive that there is a document
6	A	I would characterize them as decisions having	6		relating to one of the meetings. I think there
7		been made without having discussions having	7		were prior meetings that he was not at so those
8		occurred, and my arguments to the contrary were	8		are fair game, but I believe that the document
9		dismissed. Any plans that I had were dismissed,	9		relating to this particular meeting where John
10		and a process was put in place over which I had	10		Kacavas was and what is stated during that
11		absolutely no say.	11		meeting that it is a privileged document, and,
12	Q	Why do you believe that your arguments were	12		therefore, it's a privileged communication.
13		dismissed?	13		MR. VITT: I'll tell you what. I'll go
14	A	Oh, because they were dismissed publicly and	14		ahead and ask the questions and
15		condescendingly.	15		MR. SCHROEDER: Well, we can go off I
16	Q	By whom?	16		mean, I would like to check this if we can go
17	A	By Ed.	17		off the record for a second.
18	Q	When you say "publicly," where?	18		(Discussion off the record)
19	A	In a meeting of senior leadership.	19	Q	Can you give me the range of when the date would
20	Q	Who was there?	20		have been for this meeting?
21	A	Ed, Daniel Herrick, Heather, Joni Spring who was	21	A	It was five or six weeks before we announced the
22		one of the nursing leadership, Maria, John	22		closure of the division.
23		Kacavas, Victoria who's the publicity	23	Q	What did you understand was the purpose of the
24		communications person. Aimee Giglio.	24		meeting?
25		MR. SCHROEDER: Be careful whether or not	25	A	As I understood it, it was to convey the
		134			136
1		this was an attorney/client privileged	1		decision that the division would be closed and
2		communication. I don't know what meeting you're	2		to begin to lay out a plan for doing so.
3		talking about. You just mentioned that John	3	Q	All right. So prior to this meeting, had you
4		Kacavas was there.	4		been given an opportunity to weigh in with your
5	Q	What was the purpose of the meeting?	5		views about what should happen?
6	A	The purpose of the meeting was to from my	6	A	No. So I came prepared to that meeting because
7		perspective?	7		I thought that's what this meeting would be
8	Q	Yes. From your perspective.	8		about would be what should we do with IVF. And
9	A	The purpose of the meeting was to inform me that	9		not the division.
10		the REI Division was going to be closed and to	10	Q	All right. So tell me what you did to prepare
11		set, to set about a plan for doing that.	11		yourself for what you thought was going to
12	Q	So basically it was a business decision, and you	12		happen at the meeting.
13		were told what that business decision was,	13	A	I prepared a list of, again, essential
14		correct?	14		components of REI within the department that did
15	A	It was a decision.	15		not include IVF. That I wanted to be able to
16	Q	Right.	16		present a plan to close IVF and at a point not
17	A	And I was being told what the decision was.	17		too far down the road to be able to reopen it
18	Q	Right. So I'm going to ask you what you can	18		again with a functional team, but at this point
19		recall about what was said and whoever said it	19		because we did not have the nursing support to
20		you can tell me, and I don't think there's any	20		continue to do IVF, we could not continue to do
		issue of privilege, and if it comes up we can	21		that. I had a plan for Misty, I had a plan for
21		deal with it then. So where was the meeting?	22		Albert, I had a plan for David, I had a plan for
21 22		<u>~</u>	1		
		Where did it take place?	23		the others in the division, and it was a
22	A	Where did it take place? Fifth floor, one of the board rooms.	23		the others in the division, and it was a stand-down on doing IVF.

34 (Pages 133 to 136)

		137			139
1	A	Was my plan? No. It was not produced in	1		you.
2		writing.	2	A	At the point of this meeting, I wanted to keep
3	Q	When I say you showed up with, you had planned	3		Misty in an ultrasound role that at this point
4		to make a presentation, correct?	4		she was still on medical leave. It was unclear
5	A	Yes.	5		to me how long her recovery was going to take,
6	Q	Okay. Was there a handout?	6		and I wanted to be able to give her as much time
7	A	No. I had notes, but	7		as she needed to recover and to put her in an
8	Q	Okay. That's what I'm trying to figure out,	8		ultrasound-heavy role that would, we could then
9		whether you had actually gone to the, taken the	9		grow that role or grow her otherwise as her
10		time to write it out.	10		recovery allowed.
11	A	I had notes, yes, but I did not have a Power	11	Q	And what was Albert's role to be?
12		Point presentation or a handout.	12	A	Albert would do the other duties of an REI
13	Q	Okay. And had you thought about how to go about	13		physician until we were able to reinstitute IVF
14		recruiting an adequate nursing staff to be able	14		services.
15		to resume the IVF program?	15	Q	And David Seifer?
16	A	j ,,	16	A	David Seifer, my plan at that point would be at
17		had multiple thoughts on how to recruit an	17		the end of the year would be to counsel him out
18		adequate nursing staff. One of the outputs from	18		of his position.
19		the Value Institute was that the nursing	19	Q	Essentially tell him it would be better for
20		leadership said that they would not hire another	20		everybody if he found another job?
21		nurse into the REI Division unless it were	21	A	Yes.
22		completely revamped.	22	Q	I would presume he's heard that speech before.
23		Who in nursing leadership said that?	23		Were you able to convey any parts of your
24	Α	There were two nursing officers who were in	24		plan during the course of this meeting?
25		charge of outpatient. One was Joni Spring. The	25	A	Yes.
		138			140
1		other one I'm blanking on her name. It was the	1	Q	Tell me how it went.
2		other one.	2	A	Not well.
3	Q	Okay.	3	Q	Okay.
4	A	But she was basically the Associate Chief	4	A	Essentially every single point I brought up was
5		Nursing Officer in charge of ambulatory nursing	5		dismissed, and I was told that there was not
6		care.	6		going to be any plan, that I was not allowed to
7	Q	And she said, essentially, until you get a	7		make any plan.
		functioning division we're not going to recruit	l _		
8		runctioning division were not going to recruit	8	Q	Who told you that?
8 9		any more nurses?	9	_	Who told you that? Ed. That it was my fault.
	A			_	•
9	A Q	any more nurses?	9	A	Ed. That it was my fault.
9 10		any more nurses? Correct.	9 10	A Q	Ed. That it was my fault. He said it was your fault?
9 10 11		any more nurses? Correct. And how long had that been the stated position of the nursing? That was the output from this second Value	9 10 11	A Q A	Ed. That it was my fault. He said it was your fault? Yes.
9 10 11 12	Q	any more nurses? Correct. And how long had that been the stated position of the nursing?	9 10 11 12	A Q A Q	Ed. That it was my fault. He said it was your fault? Yes. Did he explain why? I didn't ask him to. Well, okay. Let me see if I get this, the
9 10 11 12 13	Q	any more nurses? Correct. And how long had that been the stated position of the nursing? That was the output from this second Value Institute workshop, so that was in mid-February of '17.	9 10 11 12 13 14 15	A Q A Q A	Ed. That it was my fault. He said it was your fault? Yes. Did he explain why? I didn't ask him to. Well, okay. Let me see if I get this, the context right. You've got 6, 7, 8 people
9 10 11 12 13 14	Q	any more nurses? Correct. And how long had that been the stated position of the nursing? That was the output from this second Value Institute workshop, so that was in mid-February of '17. All right. So you said you had a plan for Misty	9 10 11 12 13 14	A Q A Q A	Ed. That it was my fault. He said it was your fault? Yes. Did he explain why? I didn't ask him to. Well, okay. Let me see if I get this, the context right. You've got 6, 7, 8 people sitting around the table, right?
9 10 11 12 13 14 15 16	Q A	any more nurses? Correct. And how long had that been the stated position of the nursing? That was the output from this second Value Institute workshop, so that was in mid-February of '17. All right. So you said you had a plan for Misty Porter, a plan for Albert Hsu and a plan for	9 10 11 12 13 14 15 16	A Q A Q A	Ed. That it was my fault. He said it was your fault? Yes. Did he explain why? I didn't ask him to. Well, okay. Let me see if I get this, the context right. You've got 6, 7, 8 people sitting around the table, right? At least, yes.
9 10 11 12 13 14 15	Q A	any more nurses? Correct. And how long had that been the stated position of the nursing? That was the output from this second Value Institute workshop, so that was in mid-February of '17. All right. So you said you had a plan for Misty Porter, a plan for Albert Hsu and a plan for David Seifer, right?	9 10 11 12 13 14 15 16 17	A Q A Q A Q	Ed. That it was my fault. He said it was your fault? Yes. Did he explain why? I didn't ask him to. Well, okay. Let me see if I get this, the context right. You've got 6, 7, 8 people sitting around the table, right? At least, yes. And you're there with the understanding that
9 10 11 12 13 14 15 16	Q A	any more nurses? Correct. And how long had that been the stated position of the nursing? That was the output from this second Value Institute workshop, so that was in mid-February of '17. All right. So you said you had a plan for Misty Porter, a plan for Albert Hsu and a plan for	9 10 11 12 13 14 15 16 17 18	A Q A Q A Q	Ed. That it was my fault. He said it was your fault? Yes. Did he explain why? I didn't ask him to. Well, okay. Let me see if I get this, the context right. You've got 6, 7, 8 people sitting around the table, right? At least, yes. And you're there with the understanding that you'd have an opportunity to explain your plan
9 10 11 12 13 14 15 16 17	Q A Q	any more nurses? Correct. And how long had that been the stated position of the nursing? That was the output from this second Value Institute workshop, so that was in mid-February of '17. All right. So you said you had a plan for Misty Porter, a plan for Albert Hsu and a plan for David Seifer, right?	9 10 11 12 13 14 15 16 17 18 19 20	A Q A Q A Q	Ed. That it was my fault. He said it was your fault? Yes. Did he explain why? I didn't ask him to. Well, okay. Let me see if I get this, the context right. You've got 6, 7, 8 people sitting around the table, right? At least, yes. And you're there with the understanding that you'd have an opportunity to explain your plan for a temporarily-reduced-in-scope size of the
9 10 11 12 13 14 15 16 17 18	Q A Q	any more nurses? Correct. And how long had that been the stated position of the nursing? That was the output from this second Value Institute workshop, so that was in mid-February of '17. All right. So you said you had a plan for Misty Porter, a plan for Albert Hsu and a plan for David Seifer, right? Yes.	9 10 11 12 13 14 15 16 17 18 19 20 21	A Q A Q A Q	Ed. That it was my fault. He said it was your fault? Yes. Did he explain why? I didn't ask him to. Well, okay. Let me see if I get this, the context right. You've got 6, 7, 8 people sitting around the table, right? At least, yes. And you're there with the understanding that you'd have an opportunity to explain your plan for a temporarily-reduced-in-scope size of the REI Division, correct?
9 10 11 12 13 14 15 16 17 18	Q A Q	any more nurses? Correct. And how long had that been the stated position of the nursing? That was the output from this second Value Institute workshop, so that was in mid-February of '17. All right. So you said you had a plan for Misty Porter, a plan for Albert Hsu and a plan for David Seifer, right? Yes. What was the plan for Misty Porter? So at this point MR. SCHROEDER: What point are you talking	9 10 11 12 13 14 15 16 17 18 19 20 21	A Q A Q A Q	Ed. That it was my fault. He said it was your fault? Yes. Did he explain why? I didn't ask him to. Well, okay. Let me see if I get this, the context right. You've got 6, 7, 8 people sitting around the table, right? At least, yes. And you're there with the understanding that you'd have an opportunity to explain your plan for a temporarily-reduced-in-scope size of the REI Division, correct? That was my understanding.
9 10 11 12 13 14 15 16 17 18 19 20 21	Q A Q	any more nurses? Correct. And how long had that been the stated position of the nursing? That was the output from this second Value Institute workshop, so that was in mid-February of '17. All right. So you said you had a plan for Misty Porter, a plan for Albert Hsu and a plan for David Seifer, right? Yes. What was the plan for Misty Porter? So at this point MR. SCHROEDER: What point are you talking about?	9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	A Q A Q A Q	Ed. That it was my fault. He said it was your fault? Yes. Did he explain why? I didn't ask him to. Well, okay. Let me see if I get this, the context right. You've got 6, 7, 8 people sitting around the table, right? At least, yes. And you're there with the understanding that you'd have an opportunity to explain your plan for a temporarily-reduced-in-scope size of the REI Division, correct? That was my understanding. Your understanding. Okay. And at some point
9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q A Q	any more nurses? Correct. And how long had that been the stated position of the nursing? That was the output from this second Value Institute workshop, so that was in mid-February of '17. All right. So you said you had a plan for Misty Porter, a plan for Albert Hsu and a plan for David Seifer, right? Yes. What was the plan for Misty Porter? So at this point MR. SCHROEDER: What point are you talking	9 10 11 12 13 14 15 16 17 18 19 20 21 22	A Q A Q A Q	Ed. That it was my fault. He said it was your fault? Yes. Did he explain why? I didn't ask him to. Well, okay. Let me see if I get this, the context right. You've got 6, 7, 8 people sitting around the table, right? At least, yes. And you're there with the understanding that you'd have an opportunity to explain your plan for a temporarily-reduced-in-scope size of the REI Division, correct? That was my understanding.

35 (Pages 137 to 140)

		145			147
1		that because there was a difficulty recruiting	1		talk about closing the REI division or the
2		nurses that that was a sufficient reason to	2		second meeting where there was talk about how to
3		close the REI Division?	3		publicly spin this. At either of those two
4	, A	I apologize. Say it one more time. This is	4		meetings, did anyone talk about the effect of
5		such a miserable time in my life.	5		that decision on women's health and whether
6	Q	Sure. That's quite all right.	6		Dartmouth-Hitchcock had some obligation to meet
7		So you had this meeting.	7		the needs of women in this area?
8	Α	Yes.	8	A	Yes.
9	Q	And they say we're going to shut the REI	9	Q	Who discussed that?
10		Division, we're going to close it down, correct?	10	A	I did. And it was broadly brought up over the
11	Α	Yes.	11		phone by Chief Justice Broderick who at that
12	Q	And I asked you what was the public excuse or	12		point was, I don't know, contracted doing
13		reason that was going to be given for shutting	13		something, but
14		down the division. You said well, we've got a	14	Q	He was participating by phone?
15		problem recruiting talented nurses and that's	15	A	He was participating by phone.
16		the reason. Essentially that's what they said,	16	Q	What did he say?
17		right?	17	A	Well, he brought out the, well, what does this
18	A	They didn't call out nurses specifically. They	18		mean to, you know, our patients, what does it
19		did not want to call out nurses specifically.	19		mean to, you know, our catchment area. What's
20	Q	Supporting staff.	20		going to be the public backlash to this.
21	A	Yes.	21	Q	What did people say to that?
22	Q	Okay. Fine.	22	A	Well, there was only one voice that was talking.
23		MR. SCHROEDER: Providers is what she said.	23	Q	That was you?
24	A	Providers.	24	Α	And that was me.
25	Q	Did you understand providers to include	25	Q	What did you say?
		146			
		140			148
1		physicians?	1	A	
1 2	A	physicians?	1 2	A	
	A	physicians?		A	At that point? I mean, I said that this was a
2	A Q	physicians? No. It was nurses, but they did not want to specifically say nurses.	2	A	At that point? I mean, I said that this was a service that was a valuable part of the women's
2	_	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses?	2 3	A	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for
2 3 4	Q	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses?	2 3 4	A	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a
2 3 4 5	Q	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses? The nursing officer did not want it laid at the feet of the nurses.	2 3 4 5	A	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a valuable service in our collaboration with UVM.
2 3 4 5 6	Q A	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses? The nursing officer did not want it laid at the feet of the nurses.	2 3 4 5 6	A	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a valuable service in our collaboration with UVM. You know, we were effectively covering two
2 3 4 5 6 7	Q A	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses? The nursing officer did not want it laid at the feet of the nurses. Okay. Did you believe that the problem in	2 3 4 5 6 7	A	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a valuable service in our collaboration with UVM. You know, we were effectively covering two states in expanding our catchment area. That it
2 3 4 5 6 7 8	Q A	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses? The nursing officer did not want it laid at the feet of the nurses. Okay. Did you believe that the problem in recruiting nurses to do the work in the REI	2 3 4 5 6 7 8	A	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a valuable service in our collaboration with UVM. You know, we were effectively covering two states in expanding our catchment area. That it was short-sighted, and, again, to just say that
2 3 4 5 6 7 8 9	Q A	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses? The nursing officer did not want it laid at the feet of the nurses. Okay. Did you believe that the problem in recruiting nurses to do the work in the REI Division was a sufficient or an adequate reason to close the REI Division?	2 3 4 5 6 7 8	A Q	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a valuable service in our collaboration with UVM. You know, we were effectively covering two states in expanding our catchment area. That it was short-sighted, and, again, to just say that this is a business decision is insulting to
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2 3 4 5 6 7 8 9 10 11	Q A Q	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses? The nursing officer did not want it laid at the feet of the nurses. Okay. Did you believe that the problem in recruiting nurses to do the work in the REI Division was a sufficient or an adequate reason to close the REI Division? Thank you. No. No. I finally understand your question. It probably was a bad question before. I'm sorry. Okay. Go ahead.	2 3 4 5 6 7 8 9 10 11 12		At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a valuable service in our collaboration with UVM. You know, we were effectively covering two states in expanding our catchment area. That it was short-sighted, and, again, to just say that this is a business decision is insulting to women's health and to women's health care. Okay. Do you recall whether Heather Gunnell and Daniel Herrick said anything at either of those meetings in support of closing the REI Division?
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2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Q A Q A	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses? The nursing officer did not want it laid at the feet of the nurses. Okay. Did you believe that the problem in recruiting nurses to do the work in the REI Division was a sufficient or an adequate reason to close the REI Division? Thank you. No. No. I finally understand your question. It probably was a bad question before. I'm sorry. Okay. Go ahead. Our lack of nurses made it necessary for us to stop doing IVF. There was a substantial jump from stopping to do IVF and closing the division and making that into a business decision. There	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Q	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a valuable service in our collaboration with UVM. You know, we were effectively covering two states in expanding our catchment area. That it was short-sighted, and, again, to just say that this is a business decision is insulting to women's health and to women's health care. Okay. Do you recall whether Heather Gunnell and Daniel Herrick said anything at either of those meetings in support of closing the REI Division? They did not speak in support. So Heather did not speak. Daniel Herrick, again, tried to suggest some alternatives to closing the division more in favor of let's stop, take a pause, and make new plans, and those were, we're not going to do that.
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	Q A Q A	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses? The nursing officer did not want it laid at the feet of the nurses. Okay. Did you believe that the problem in recruiting nurses to do the work in the REI Division was a sufficient or an adequate reason to close the REI Division? Thank you. No. No. I finally understand your question. It probably was a bad question before. I'm sorry. Okay. Go ahead. Our lack of nurses made it necessary for us to stop doing IVF. There was a substantial jump from stopping to do IVF and closing the division and making that into a business decision. There are many things that went into our inability to	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Q	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a valuable service in our collaboration with UVM. You know, we were effectively covering two states in expanding our catchment area. That it was short-sighted, and, again, to just say that this is a business decision is insulting to women's health and to women's health care. Okay. Do you recall whether Heather Gunnell and Daniel Herrick said anything at either of those meetings in support of closing the REI Division? They did not speak in support. So Heather did not speak. Daniel Herrick, again, tried to suggest some alternatives to closing the division more in favor of let's stop, take a pause, and make new plans, and those were, we're not going to do that.
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	Q A Q A	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses? The nursing officer did not want it laid at the feet of the nurses. Okay. Did you believe that the problem in recruiting nurses to do the work in the REI Division was a sufficient or an adequate reason to close the REI Division? Thank you. No. No. I finally understand your question. It probably was a bad question before. I'm sorry. Okay. Go ahead. Our lack of nurses made it necessary for us to stop doing IVF. There was a substantial jump from stopping to do IVF and closing the division and making that into a business decision. There are many things that went into our inability to hire nurses, but that was the ultimate final	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	Q	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a valuable service in our collaboration with UVM. You know, we were effectively covering two states in expanding our catchment area. That it was short-sighted, and, again, to just say that this is a business decision is insulting to women's health and to women's health care. Okay. Do you recall whether Heather Gunnell and Daniel Herrick said anything at either of those meetings in support of closing the REI Division? They did not speak in support. So Heather did not speak. Daniel Herrick, again, tried to suggest some alternatives to closing the division more in favor of let's stop, take a pause, and make new plans, and those were, we're not going to do that. I want to make sure that I've got the right
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	Q A Q A	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses? The nursing officer did not want it laid at the feet of the nurses. Okay. Did you believe that the problem in recruiting nurses to do the work in the REI Division was a sufficient or an adequate reason to close the REI Division? Thank you. No. No. I finally understand your question. It probably was a bad question before. I'm sorry. Okay. Go ahead. Our lack of nurses made it necessary for us to stop doing IVF. There was a substantial jump from stopping to do IVF and closing the division and making that into a business decision. There are many things that went into our inability to hire nurses, but that was the ultimate final push that made us have to stop doing IVF. And	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	Q	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a valuable service in our collaboration with UVM. You know, we were effectively covering two states in expanding our catchment area. That it was short-sighted, and, again, to just say that this is a business decision is insulting to women's health and to women's health care. Okay. Do you recall whether Heather Gunnell and Daniel Herrick said anything at either of those meetings in support of closing the REI Division? They did not speak in support. So Heather did not speak. Daniel Herrick, again, tried to suggest some alternatives to closing the division more in favor of let's stop, take a pause, and make new plans, and those were, we're not going to do that. I want to make sure that I've got the right understanding about certainly that first meeting
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q A Q A	physicians? No. It was nurses, but they did not want to specifically say nurses. What's wrong with saying nurses? The nursing officer did not want it laid at the feet of the nurses. Okay. Did you believe that the problem in recruiting nurses to do the work in the REI Division was a sufficient or an adequate reason to close the REI Division? Thank you. No. No. I finally understand your question. It probably was a bad question before. I'm sorry. Okay. Go ahead. Our lack of nurses made it necessary for us to stop doing IVF. There was a substantial jump from stopping to do IVF and closing the division and making that into a business decision. There are many things that went into our inability to hire nurses, but that was the ultimate final push that made us have to stop doing IVF. And from there, a decision was made to close. That was never my intention.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q	At that point? I mean, I said that this was a service that was a valuable part of the women's health services that D-H had been providing for the last 25 years and that it continued to be a valuable service in our collaboration with UVM. You know, we were effectively covering two states in expanding our catchment area. That it was short-sighted, and, again, to just say that this is a business decision is insulting to women's health and to women's health care. Okay. Do you recall whether Heather Gunnell and Daniel Herrick said anything at either of those meetings in support of closing the REI Division? They did not speak in support. So Heather did not speak. Daniel Herrick, again, tried to suggest some alternatives to closing the division more in favor of let's stop, take a pause, and make new plans, and those were, we're not going to do that. I want to make sure that I've got the right understanding about certainly that first meeting went down. The way you describe it, Ed Merrens

37 (Pages 145 to 148)

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	A Q A Q Q	Yes. There was, again, some push-back from Maria. Daniel had said well, you know, we do have some alternative plans that we could discuss, and none of it was entertained. Do you have any reason to believe that either of those meetings were recorded? No. Was someone taking official or semiofficial notes? I don't think so. Did you see at any point a document, email, a	1 2 3 4 5 6 7 8 9	Q	I don't remember most of this. Some of this meeting I remember crystal clearly. Some of it I didn't remember well because it was clearly Leslie, this is not your action item. You're not going to, you know, I'm done with you. Was that Ed Merrens essentially, I'm done with
3 4 5 6 7 8 9 10 11 12 13 14 15 16	A Q A	have some alternative plans that we could discuss, and none of it was entertained. Do you have any reason to believe that either of those meetings were recorded? No. Was someone taking official or semiofficial notes? I don't think so. Did you see at any point a document, email, a	3 4 5 6 7 8		I didn't remember well because it was clearly Leslie, this is not your action item. You're not going to, you know, I'm done with you.
4 5 6 7 8 9 10 11 12 13 14 15 16	A Q A	discuss, and none of it was entertained. Do you have any reason to believe that either of those meetings were recorded? No. Was someone taking official or semiofficial notes? I don't think so. Did you see at any point a document, email, a	4 5 6 7 8 9		Leslie, this is not your action item. You're not going to, you know, I'm done with you.
5 6 7 8 9 10 11 12 13 14 15 16	A Q A	Do you have any reason to believe that either of those meetings were recorded? No. Was someone taking official or semiofficial notes? I don't think so. Did you see at any point a document, email, a	5 6 7 8 9		not going to, you know, I'm done with you.
6 7 8 9 10 11 12 13 14 15 16	A Q A	those meetings were recorded? No. Was someone taking official or semiofficial notes? I don't think so. Did you see at any point a document, email, a	6 7 8 9		
7 8 9 10 11 12 13 14 15 16	Q A	No. Was someone taking official or semiofficial notes? I don't think so. Did you see at any point a document, email, a	7 8 9		Was that Ed Merrens essentially. I'm done with
8 9 10 11 12 13 14 15	Q A	Was someone taking official or semiofficial notes? I don't think so. Did you see at any point a document, email, a	8 9		was that La Merrens essentially, Thi done with
9 10 11 12 13 14 15	A	notes? I don't think so. Did you see at any point a document, email, a	9	Λ	you?
10 11 12 13 14 15		I don't think so. Did you see at any point a document, email, a		А	Yeah.
11 12 13 14 15 16		Did you see at any point a document, email, a	1.0	Q	Were you still Chair at the time?
12 13 14 15 16	Q		1 -0	A	Yes.
13 14 15 16			11	Q	Did you understand based on what had happened at
14 15 16		memo, you name it, that purports to be a summary	12		this meeting that your tenure as Chair was
15 16		of what was discussed at either of those	13		somewhat tenuous?
16		meetings?	14	A	No. No.
	Α	No.	15	Q	You thought you would continue to be Chair.
1 🗁	Q	You didn't see anything like that?	16	A	Yes.
17	A	No.	17	Q	And how did it come about that you ceased to be
18	Q	Was John Kacavas at both meetings or just one?	18		Chair?
19	A	I don't know for sure.	19	Α	Ed and I were in a meeting together where we
20	Q	Did he say anything to you at those meetings?	20		were discussing what we had, what I and Heather
21	A	No.	21		had been doing to try to fill in the service
22	Q	Was there a discussion about the possibility of	22		gaps, and heal this huge wound in the
23	•	litigation?	23		department, and he said I've given you enough
24	Α	No.	24		time, and I said it has been six weeks, and this
25	Q	Nobody raised the possibility that hey, we fire	25		was a bomb that went off in our department. And
		150			152
1		a bunch of people, we may get sued?	1		he said once again, this was your doing. This
2	A	No. The discussion was we have to go back and	2		is your fault. You were the one that made this
3		look at everyone's contracts.	3		decision, and I looked at him and I said I
4	Q	Why?	4		certainly did not. And he looked at me and he
5	Α	That was directed to the HR person and to	5		said I don't think we can continue to work
6		shoot. The other lawyer.	6		together anymore.
7	Q	There was another lawyer there besides Kacavas?	7	Q	Was anyone else there besides the two of you?
8	Α	At one of the meetings, yes. It was the woman	8	A	No, but that was it. Like I don't think we can
9		who's actually	9		either.
10	Q	Kim Troland?	10	Q	How soon after that discussion did you step down
11	A	Kim Troland. Thank you. My brain doesn't	11		as Chair?
12		remember names very well.	12	A	At that meeting he said we'll meet again next
13	Q	Not a problem.	13		week and talk about terms of your stepping down.
14	A	I can see her face.	14		What I found out was that, this was on a
15	Q	Was the fact that Misty Porter was on short-term	15		Wednesday, that by two days later, that Friday,
16		disability or part-time disability, was that	16		he had already announced to several other Chairs
17		issue brought up?	17		that I was stepping down.
18	A	Yes. I think it was brought up as fact that she	18	Q	
19		was on disability.	19	A	Yes. I hadn't even had a chance to discuss it
20	Q	Who brought it up?	20		with my faculty.
21	A	I don't remember.	21	Q	How did it come about that you, after you
22	Q	Somebody brought up the fact that at the moment	22		stepped down, what position did you hold or what
23	-	of that meeting she was on disability.	23		were you going to be doing?
24	A	Yes.	24	A	
25	Q	Anybody respond to that, do you recall?	25	Q	

38 (Pages 149 to 152)

		157			159
1		Division?	1		no Bates numbers on those.
2	A	No. She did not. She said it was a business	2		(Exhibit 20 marked for identification)
3		decision.	3	Q	Show you what's been marked as Exhibit 20. This
4	. Q	Did she get into a discussion of what would have	4		is an email from Heather Gunnell to you and
5		to happen from an HR perspective if the decision	5		Daniel Herrick, correct?
6		was made to close the REI division?	6	A	Yes.
7	A	What she said was this is a business decision to	7	Q	And it's dated April 19, 2017. Do you believe
8		close the division. Therefore, there is no job,	8		the meetings that you've referenced today that
9		there is no position for these physicians.	9		we've been talking about for a while took place
10	Q	She wouldn't know that, would she? I mean, how	10		after April 19, 2017?
11	•	does the	11	Α	This again was focused on shutting down IVF.
12		MR. SCHROEDER: Objection. Calling for	12		MR. SCHROEDER: Did you hear the question?
13		speculation as to what she would or would not	13	Α	I'm sorry.
14		know.	14		MR. SCHROEDER: So answer it again.
15	Q	How does the HR have an informed basis for	15	Α	I'm sorry. I guess I didn't. Would you please
16	V	deciding the services that are needed, the	16		ask the question again?
17		services these physicians are capable of	17	Q	Sure.
18		performing and whether or not it's a good idea	18	A	Oh, I know what it please ask the question
19		to keep them? Is that something you expect HR	19		again.
20		to weigh in on?	20	Q	Heather Gunnell in this email says I added a
21		MR. SCHROEDER: Objection.	21	Q	brief staffing plan for both a complete shutdown
22		Mischaracterizes her testimony. You're also	22		and a rebuild. My assumption is that MBP
23		•	23		that's Dr. Porter will be refocused to Gyn
24		asking her to speculate as to what Amy Giglio	24		
		does or does not think.	25		ultrasound. U/S, right? That's ultrasound?
25	A	I don't know what Aimee Giglio's decision-making	25	A	Yes.
		158			160
1		ability actually is. What she said was because	1	Q	Okay. Now
2		this is a business decision to close the	2	A	The complete shutdown is actually shutting down
3		division, there is no longer a position for REI	3		the IVF program, not shutting down the division.
4		physicians.	4	Q	That was your understanding as of this date?
5	Q	Was there a discussion in either of the meetings	5	A	Correct.
6		about redeploying Dr. Porter to do ultrasound	6	Q	And this assumption of having Dr. Porter
7		work?	7		
8	Α	That was not discussed at the meeting. That was			refocused to begin ultrasound, that was
		That was not discussed at the meeting. That was	8		
9	7.1	something that I had in the back of my mind	8 9	A	something you had considered as well, right?
9 10	11	something that I had in the back of my mind		A	something you had considered as well, right? Yes. That was, again, because of the
	11	something that I had in the back of my mind because, again, what I wanted to try to do was	9	A	something you had considered as well, right?
10	11	something that I had in the back of my mind because, again, what I wanted to try to do was to keep Misty employed. So I had a choice of	9 10	A	Yes. That was, again, because of the recommendations that were made by the Value Institute that we needed a shutdown and rebuild
10 11	11	something that I had in the back of my mind because, again, what I wanted to try to do was to keep Misty employed. So I had a choice of could I keep her within the department or could	9 10 11	A	something you had considered as well, right? Yes. That was, again, because of the recommendations that were made by the Value Institute that we needed a shutdown and rebuild of the IVF program, and that one of the issues
10 11 12	11	something that I had in the back of my mind because, again, what I wanted to try to do was to keep Misty employed. So I had a choice of could I keep her within the department or could I have her be a member of the Department of	9 10 11 12	A	something you had considered as well, right? Yes. That was, again, because of the recommendations that were made by the Value Institute that we needed a shutdown and rebuild of the IVF program, and that one of the issues was in Misty's leadership of that program. I
10 11 12 13	11	something that I had in the back of my mind because, again, what I wanted to try to do was to keep Misty employed. So I had a choice of could I keep her within the department or could I have her be a member of the Department of Radiology. So I actually had a conversation	9 10 11 12 13	A	something you had considered as well, right? Yes. That was, again, because of the recommendations that were made by the Value Institute that we needed a shutdown and rebuild of the IVF program, and that one of the issues was in Misty's leadership of that program. I wanted to keep Misty in the department. I
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10 11 12 13 14 15 16	Q A	something that I had in the back of my mind because, again, what I wanted to try to do was to keep Misty employed. So I had a choice of could I keep her within the department or could I have her be a member of the Department of Radiology. So I actually had a conversation with Jocelyn Chertoff about potentially having Misty move into Radiology. Was she all right with that?	9 10 11 12 13 14 15 16	A	something you had considered as well, right? Yes. That was, again, because of the recommendations that were made by the Value Institute that we needed a shutdown and rebuild of the IVF program, and that one of the issues was in Misty's leadership of that program. I wanted to keep Misty in the department. I wanted her to be able to concentrate on something that she was really great at, and then as she recovered to then work with her on what
10 11 12 13 14 15 16 17	Q	something that I had in the back of my mind because, again, what I wanted to try to do was to keep Misty employed. So I had a choice of could I keep her within the department or could I have her be a member of the Department of Radiology. So I actually had a conversation with Jocelyn Chertoff about potentially having Misty move into Radiology. Was she all right with that? No. She said I have no, I have no position	9 10 11 12 13 14 15 16 17 18	A	Yes. That was, again, because of the recommendations that were made by the Value Institute that we needed a shutdown and rebuild of the IVF program, and that one of the issues was in Misty's leadership of that program. I wanted to keep Misty in the department. I wanted her to be able to concentrate on something that she was really great at, and then as she recovered to then work with her on what we could do with the IVF program as it existed
10 11 12 13 14 15 16 17 18	Q	something that I had in the back of my mind because, again, what I wanted to try to do was to keep Misty employed. So I had a choice of could I keep her within the department or could I have her be a member of the Department of Radiology. So I actually had a conversation with Jocelyn Chertoff about potentially having Misty move into Radiology. Was she all right with that? No. She said I have no, I have no position available in Radiology. I'm not interested in	9 10 11 12 13 14 15 16 17 18	A	Yes. That was, again, because of the recommendations that were made by the Value Institute that we needed a shutdown and rebuild of the IVF program, and that one of the issues was in Misty's leadership of that program. I wanted to keep Misty in the department. I wanted her to be able to concentrate on something that she was really great at, and then as she recovered to then work with her on what we could do with the IVF program as it existed at that point in the future. So again, this
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10 11 12 13 14 15 16 17 18 19 20 21 22 23	Q A	something that I had in the back of my mind because, again, what I wanted to try to do was to keep Misty employed. So I had a choice of could I keep her within the department or could I have her be a member of the Department of Radiology. So I actually had a conversation with Jocelyn Chertoff about potentially having Misty move into Radiology. Was she all right with that? No. She said I have no, I have no position available in Radiology. I'm not interested in hiring Misty within the department. Okay. Exhibit 20 will be a document that was marked as Exhibit 17 during the Merrens deposition. Numbers are 2582 through 2583, but	9 10 11 12 13 14 15 16 17 18 19 20 21 22 23		you had considered as well, right? Yes. That was, again, because of the recommendations that were made by the Value Institute that we needed a shutdown and rebuild of the IVF program, and that one of the issues was in Misty's leadership of that program. I wanted to keep Misty in the department. I wanted her to be able to concentrate on something that she was really great at, and then as she recovered to then work with her on what we could do with the IVF program as it existed at that point in the future. So again, this was, I wanted to keep Misty. You said that Aimee Giglio mentioned apparently more than once in these meetings that it was a business decision to shut it down, right?
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40 (Pages 157 to 160)